·									Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003									RD 10786199						
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OR	OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			2.1					RATE FEE		FEE]	RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE 385.00		385.00	OR	BASIC FEE	770.00		
TOTAL CHARGEABLE CLAIMS			2/ minus 20=		- 1			X\$ 9=			OR	X\$18=	18		
INDEPENDENT CLAIMS			3 minus 3 =		0			X43=			OR	X86=	-		
ML	JLTIPLE DEPEI	NDENT CLAIM P	RESENT				+145			7.	OR	+290=	-		
* If	the difference	in column 1 is	less than zero, enter "0" in o			column 2	ı	TOTAL			OR	TOTAL	789		
CLAIMS AS AMENDED - PART II								CMAL		NTITY	OR-	OTHER SMALL			
_	I	(Column 1)	 	(Colun		(Column 3)	i r	SMALL				SMALL	ADDI-		
AMENDMENT A		REMAINING AFTER AMENDMENT		PREVIO	USLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	TIONAL FEE		
	Total	. 21	Minus	- 0			·	X\$ 9=	1100		OR	X\$18=			
	Independent	NTATION OF MI	Minus	3	CI AINA	=		X43=			OR	X86=			
	PIRST PRESE	NIATION OF MI	JLIIPLE DE	PENDENI	CLAIM			+145=			OR	+290=			
	٠					•	L A	TOTA			OR ,	TOTAL ADDIT, FEE			
		(Column 1)		(Colum	n 2)	(Column 3)									
В		CLAIMS REMAINING		HIGHE		PRESENT	Γ			ADDI-		•	ADDI-		
AMENDMENT		AFTER AMENDMENT		PREVIO	USLY	EXTRA		RATE	T	IONAL FEE		RATE	TIONAL		
	Total	•	Minus	û#		-		X\$ 9=			OR	X\$18=			
	Independent	*	Minus	TIPLE DEPENDENT				X43=			OR	X86=			
	THOTPHEOL	THAT ON ON MICE		<u> </u>	00			+145=			OR	+290=			
							5 LA	TOTA			OR ,	TOTAL IDDIT. FEE			
		(Column 1)	•	(Colum	ın 2)	(Column 3)			•		·		•		
AMENDMENT C	`	CLAIMS REMAINING	·	HIGHE NUMB	ST		Г		17	ADDI-	ſ		ADDI-		
		AFTER AMENDMENT		PREVIO	USLY	PRESENT EXTRA	L	RATE	TI	ONAL FEE	L	RATE	TIONAL FEE		
	Total	•	Minus	drik.		= .		X\$ 9=			OR	X\$18=			
	Independent	•	Minus	***				X43=	T		OR	X86=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	-	——[~~				
* H	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								丄		OR	+290=			
**If the entry in column 1 is less than the entry in column 2, write 0 in column 3. **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **OPA ADDIT. FEE															
		ber Previously Paid					found	d in the a	ppro	priate box	in colu	m ก 1.			